

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO. <u>10/804677</u>	FILING DATE	
							APPLICANT(S)		
CLAIMS									
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT				
	IND	DEP	IND	DEP	IND	DEP		IND	DEP
1							31		
2							32		
3							33		
4							34		
5							35		
6							36		
7							37		
8							38		
9							39		
10							40		
11							41		
12							42		
13		7		7			43		
14		1		1			44		
15		1		1			45		
16		1		1			46		
17		2		2			47		
18		2		2			48		
19		1		1			49		
20		1		1			50		
21		2		2					
22		2		2					
23		2		2					
24		2		2					
25		2		2					
26		2		2					
27		1		1					
28		1		1					
29		1		1					
30		1		1					
31		1		1					
32		1		1					
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43									
44									
45									
46									
47									
48									
49									
50									
TOTAL IND.			12				TOTAL IND.		
TOTAL DEP.			26				TOTAL DEP.		
TOTAL CLAIMS			38				TOTAL CLAIMS		